

EMPLOYEE IDENTIFICATION CARD WORKSHEET

THIS ACTION IS TO:

☐ **Issue access**

Section I thru IV

☐ **Update information**

☐ **Suspend access**

Section I and IV

SECTION I – IDENTIFICATION

1. NAME (LAST, FIRST, MI)

2. GRADE

3. DIRECTORATE

SECTION II – PERSONAL DATA

4. SSN

5. COLOR OF EYES

6. WEIGHT

7. HEIGHT

8. DOB(mmdd)

9. EMPLOYEE STATUS

SAD SCS ADSW FED TECH AGR

10. WORK PHONE #

11. HOME PHONE:

12. PERM/TEMP

13. TEMP DUTY START DATE

14. TEMP DUTY END DATE

I understand that it is my responsibility to provide updates to CAJS-PO as changes occur. Upon termination of duty at the Office of the Adjutant General the Identification Card will be returned to CAJS-PO-SI.

15. SIGNATURE OF REQUESTOR

SECTION III – VEHICLE DATA

YEAR

MAKE

LICENSE NUMBER

SECTION IV – RECOMMENDATION (inactivate badge, replace badge, special requirements, etc.)

SIGNATURE OF DIRECTOR

REMARKS

DATE

SECTION V - CHIEF OF STAFF (suspension only) ☐ Army ☐ Air ☐ Joint ☐ Cmd

SIGNATURE

REMARKS ☐ Escort required ☐ Suspend badge ☐ Other (specify)

DATE

SECTION VI – HQ STARC COMMANDER (suspension only)

SIGNATURE

REMARKS

DATE

SECTION VII – CAJS-PO USE ONLY

APPROVED BY

REMARKS

Home Address: _____

SIGNATURE

DATE

Employee Initial & Date: _____

CARD #